			CANDIDATE INTENTION STATEMENT		
Candidate Intention	Statement	Type or Print in Ink.	Date Stamp	CALIFO	
			RECEIVE	FOR	
Check One: Initial	Amendment (Explain)		_	For	Official Use Only
			AUG 0 9 2002		
					
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME		ISTRICT NUMBER, if applicable.	NON-PARTIS	AN
COUNCIL MIKIN	BER LODI CO	ty Council		PARTY:	
State Candidate Ev	penditure Limit Statement:	Voluntary Expen	diture Coilings:		
	required to complete Part 2 until 11/6/02. CalPERS can	/Carr Carla Carta - 054	00)		
judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)		Office			General or
(Year of Election) Primary/general election (Year of Election) Special/runoff election		ff election (Effective 1/1/01)			Special Run-off
(Check one box)		(Effective 1/1/01) Assembly		\$400,000	\$700,000
☐ I accept the voluntary e	xpenditure ceiling for the election stated a			\$600,000	\$900,000
	untary expenditure ceiling for the election			*****	••••
above.		(Effective 11/6/02)		£4 000 000	#4 500 000
Amendment: O I did not exceed the expenditure ceiling in the primary or special election held on:		Board of Equalization ecial		\$1,000,000	\$1,500,000
		ry Governor	Maran Canada	\$6,000,000	\$10,000,000
expenditure ceiling	for the general or special run-off election.	Lieutenant Governor, A Insurance Commissione		\$4,000,000	\$6,000,000
(Mark if applicable)		Secretary of State, Sup			
On/, I	contributed personal funds in excess of th	Treasurer			
expenditure ceiling for the	ne election stated above.	i			
. Verification:					
	erjury under the laws of the State of Califo	ornia that the foregoing is true and co	rrect		
9/-	1/27	1/1/20			
Executed on	/ Cc Signa day, year)	(Candidate)	~!~		

FPPC Form 501 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772